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## Declaration Of Charles M. Poser, M.D.

- I, Charles M. Poser, M.D., do hereby attest and state as follows:
- 1. When I came to Cincinnati on January 29, 2004, for the *Daubert* hearing in the above matter, I was prepared to testify concerning my qualifications and the bases for my opinions in this case. Because I was unable to testify, I refer the Court to my Curriculum Vitae, my report, and attached articles for my qualifications and scientific bases for my opinion.
- 2. As is evidenced in my CV and bibliography, I have published over 240 articles in the peer-reviewed medical literature, as well as 85 reviews and chapters in books. Additionally, I have been the author of 5 books and the editor of another 5 books.
- 3. I have been involved in other *Daubert* hearings, and I have never been denied the opportunity to render my opinion on the basis of such a challenge.
- 4. My testimony regarding Mr. Jeffries' condition and what caused it was already accepted in the U.S. Court of Federal Claims.
  - 5. I have the records in this case and have seen Mr. Jeffries professionally on two occasions.
- 6. I have diagnosed Mr. Jeffries with myalgic encephalomyelitis, which is a well-recognized term for chronic fatigue syndrome ("ME/CFS"). In 1983, I published criteria for this condition that I believe are more restrictive than the criteria used by the CDC and others. My published criteria have been utilized by other medical doctors. Even though my criteria are more restrictive, Mr. Jeffries still meets my criteria and all published criteria for the diagnosis of ME/CFS.
- I am attaching copies of printouts from the CDC and the NIH web sites on CFS and Mr.
  Jeffries fits their diagnostic criteria.
  - 8. CFS is primarily a clinical diagnosis, and that is all that I require to make the diagnosis.
- 9. While I have been advised that my opinion that Mr. Jeffries has ME/CFS is not the subject of any *Daubert* motion, I do want the Court to know that I find the PET and SPECT scan results interesting, but I will leave the description of the significance of those results to others more involved in that work than I.

10. Also, in my opinion, the most likely cause of Mr. Jeffries' ME/CFS is the hepatitis B vaccine he received just prior to the onset of his symptoms. I have already described this in my report and in my deposition. My opinion is supported by the medical literature. It has long been recognized that vaccines are capable of triggering the onset of CFS, and I have referred to the article from the CDC in that regard (copy attached). I have also personally been involved in the study of adverse reactions to vaccines for several decades

11. The attached information from the NIH refers to CFS being reported after hepatitis, the illness. It is a well-recognized axiom, one that I have published on, that anything that the disease can cause can also be caused by the vaccination for that illness. The NIH materials also recognize the potential role of yeast, and the Hepatitis B vaccine also contains yeast, as well as mercury and aluminum.

Charles M. Poser MD PRCP